

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF INDIANA

Case number (if known)

Chapter

11☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **JMWays LLC d/b/a Skyline Chili**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) **82-2774193**

4. Debtor's address

Principal place of business

**3505 Grant Line Rd.
New Albany, IN 47150**

Number, Street, City, State & ZIP Code

Clark

County

Mailing address, if different from principal place of business

**3310 E 10th St. Suite 351
Jeffersonville, IN 47130**

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ **Chapter 11. Check *all* that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District When Case number, if known

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

- ☐ It needs to be physically secured or protected from the weather.

- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☒ \$1,000,001 - \$10 million

☐ \$500,000,001 - \$1 billion

Debtor	JMWays LLC d/b/a Skyline Chili	Case number (if known)	
Name			
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion	
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion	
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion	

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 6, 2023**
MM / DD / YYYY**X /s/ William Jacobs**

Signature of authorized representative of debtor

William Jacobs

Printed name

Title **Managing Partner****18. Signature of attorney****X /s/ Weston E. Overturf**

Signature of attorney for debtor

Date **October 6, 2023**

MM / DD / YYYY

Weston E. Overturf

Printed name

Kroger, Gardis & Regas, LLP

Firm name

**111 Monument Circle
Suite 900
Indianapolis, IN 46204**

Number, Street, City, State & ZIP Code

Contact phone **317-777-7443**

Email address

27281-49 IN

Bar number and State

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 6, 2023X /s/ William Jacobs

Signature of individual signing on behalf of debtor

William Jacobs

Printed name

Managing Partner

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **JMWays LLC d/b/a Skyline Chili**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known): _____

☐ Check if this is an
amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Angel Long 712 Academy Dr. Apt 11 New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$561.00
Christopher Goode 494 South Main St. Marengo, IN 47140		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$437.00
David Kessinger II 2220 E Spring St. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$1,008.00
Elizabeth Nieman 6255 Forest Grove Dr. NE Georgetown, IN 47122		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$207.00
Gary Swartz 2225 Heritage Way Northwest Corydon, IN 47112		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$1,188.00
Haley Hagedorn 1611 State St. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$495.00

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Hannah Doss 4244 Grantline View Court New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$495.00
Jenna Knauer 708 Academy Dr. Apt 20 New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$132.00
Jeremiah Royalty 2688 Grant Line Road Apt 10D New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$336.00
Kami Kessinger 2221 Hamburg Pike Jeffersonville, IN 47130		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$981.00
Kim Clare 145 McGrain St. Corydon, IN 47112		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$2,076.94
Kindra Bailey 352 Erni Ave. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$468.00
Lisa Graham 814 University Woods Dr. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$131.00
Mariah Smith 1722 Ekin Avenue New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$855.00

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Mike Marlow 3310 E 10th St. Suite 351 Jeffersonville, IN 47130		Loan				\$133,114.00
Mike Marlow 403 Orchard Hill Dr. #8 Jeffersonville, IN 47130		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$2,307.70
Nashiria Neal 1515 Byron Dr. Clarksville, IN 47129		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$340.00
Taylor Barnett 30 Countryside Dr. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$242.00
Thomas Cornett 1444 Vincennes St. New Albany, IN 47150		Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion				\$930.00
William Jacobs 3505 Grant Line Rd. New Albany, IN 47150		Loan				\$44,200.00

Fill in this information to identify the case:

Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum**
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>1,200,000.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>157,890.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>1,357,890.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>1,354,914.72</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>13,190.64</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>177,314.00</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>1,545,419.36</u>

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. First Savings BankChecking9517\$4,418.003.2. PNC BankChecking5299\$100.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$4,518.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Debtor JMWays LLC d/b/a Skyline Chili
Name

Case number (If known) _____

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Food products, paper goods and merchandise		\$11,000.00		\$11,000.00

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$11,000.00

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			

Debtor **JMWays LLC d/b/a Skyline Chili** Case number (If known) _____
 Name

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**
Furniture \$88,241.00 \$88,241.00

42. **Collectibles** *Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*

43. **Total of Part 7.** \$88,241.00
 Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. Food Trailer with equipment	<u>\$2,100.00</u>		<u>\$1,250.00</u>
47.2. Van	<u>\$10,000.00</u>		<u>\$10,000.00</u>

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**
Walk in cooler/freezer, steam table, ice machine, smallwares. \$42,881.00 \$42,881.00

51. **Total of Part 8.** \$54,131.00
 Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (If known) _____

- ☒ No
☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Building located on leased land.		Unknown		\$1,200,000.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
 Copy the total to line 88.

\$1,200,000.00**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties Skyline Franchise Agreement and option for two additional locations	Unknown		Unknown

63. Customer lists, mailing lists, or other compilations**64. Other intangibles, or intellectual property****65. Goodwill**

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (If known) _____

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.0067. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$4,518.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$11,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$88,241.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$54,131.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$1,200,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$157,890.00	\$1,200,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$1,357,890.00

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	First Savings Bank <small>Creditor's Name</small> 501 E. Lewis & Clark Parkway Clarksville, IN 47129 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 7008 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien SEE UCC FINANCING STATEMENT ATTACHED Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,354,914.72	\$0.00

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$1,354,914.7
2

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

UCC FINANCING STATEMENT

NAME OF CONTACT AT FILER

LIEN SOLUTIONS

Indiana Secretary of State

201800005333439

Jun 29 2018 8:00 AM

EMAIL ADDRESS

UCCFILINGRETURN@WOLTERSKLUWER.COM

DEBTOR'S EXACT FULL LEGAL NAME**ORGANIZATION'S NAME**

JM WAYS, LLC

MAILING ADDRESS3310 E. 10TH STREET
#351**CITY**

JEFFERSONVILLE

STATE

IN

POSTAL CODE

47130

COUNTRY

USA

DEBTOR'S EXACT FULL LEGAL NAME**ORGANIZATION'S NAME**

NA ONE LLC

MAILING ADDRESS3310 E. 10TH STREET
#351**CITY**

JEFFERSONVILLE

STATE

IN

POSTAL CODE

47130

COUNTRY

USA

SECURED PARTY'S NAME**ORGANIZATION'S NAME**

FIRST SAVINGS BANK

MAILING ADDRESS501 E. LEWIS & CLARK
PARKWAY**CITY**

CLARKSVILLE

STATE

IN

POSTAL CODE

47129

COUNTRY

USA

THIS FINANCING STATEMENT covers the following collateral:

ALL ASSETS AND PROPERTY INCLUDING BUT NOT LIMITED TO THE FOLLOWING: ALL EQUIPMENT AND MACHINERY, (EXCLUDING MOTOR VEHICLES), INCLUDING POWER-DRIVEN MACHINERY AND EQUIPMENT, FURNITURE AND FIXTURES NOW OWNED OR HEREAFTER ACQUIRED, TOGETHER WITH ALL REPLACEMENTS THEREOF, ALL ATTACHMENTS, ACCESSORIES, ACCESSIONS, PARTS AND TOOLS BELONGING THERETO OR FOR USE IN CONNECTIONS THEREWITH, WHEREVER LOCATED. ALL GOODS AND ACCESSIONS. ALL INVENTORY, RAW MATERIALS, WORK IN PROCESS AND SUPPLIES NOW OWNED OR HEREAFTER ACQUIRED. ALL ACCOUNTS, DEPOSIT ACCOUNTS, ACCOUNTS RECEIVABLE NOW OUTSTANDING OR HEREAFTER ARISING, AND ALL BOOKS, AND RECORDS PERTAINING THERETO AND ALL ADDITIONS, SUBSTITUTIONS, REPLACEMENTS AND PROCEEDS THEREOF. ALL CONTRACT RIGHTS, DOCUMENTS, INSTRUMENTS AND PROMISSORY NOTES, INVESTMENT PROPERTY, CHATTEL PAPER, GENERAL INTANGIBLES AND PAYMENT INTANGIBLES NOW IN FORCE OR HEREAFTER ACQUIRED, INCLUDING GOOD WILL AND ALL OTHER ASSETS, LEASES, RIGHTS TO LEASES OR LEASED PROPERTIES. ALL OF THE ABOVE, WHETHER NOW OR HEREAFTER OWNED AND WHEREVER LOCATED AND THE PROCEEDS THEREOF.

Optional Filer Reference

64920150

Fill in this information to identify the case:Debtor name **JMWays LLC d/b/a Skyline Chili**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF INDIANA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Angel Long 712 Academy Dr. Apt 11 New Albany, IN 47150 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$561.00 \$0.00
2.2	Priority creditor's name and mailing address Christopher Goode 494 South Main St. Marengo, IN 47140 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$437.00 \$0.00

Debtor JMWays LLC d/b/a Skyline Chili		Case number (if known)	
Name			
2.3	Priority creditor's name and mailing address David Kessinger II 2220 E Spring St. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,008.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address David Kessinger Sr. 2221 Hamburg Pike Jeffersonville, IN 47130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address Elizabeth Nieman 6255 Forest Grove Dr. NE Georgetown, IN 47122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$207.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address Gary Swartz 2225 Heritage Way Northwest Corydon, IN 47112	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,188.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	JMWays LLC d/b/a Skyline Chili		Case number (if known)		
	Name				

2.7	Priority creditor's name and mailing address Haley Hagedorn 1611 State St. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$495.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Hannah Doss 4244 Grantline View Court New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$495.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Indiana Department of Revenue 100 North Senate Avenue Indianapolis, IN 46204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: 2020-present income and other withholding taxes		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Internal Revenue Service 575 N. Pennsylvania Street Indianapolis, IN 46204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: 2020-present income and withholding taxes		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor JMWays LLC d/b/a Skyline Chili		Case number (if known)	
Name			
2.11	Priority creditor's name and mailing address Jenna Knauer 708 Academy Dr. Apt 20 New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$132.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.12	Priority creditor's name and mailing address Jeremiah Royalty 2688 Grant Line Road Apt 10D New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$336.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.13	Priority creditor's name and mailing address Kami Kessinger 2221 Hamburg Pike Jeffersonville, IN 47130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$981.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.14	Priority creditor's name and mailing address Kim Clare 145 McGrain St. Corydon, IN 47112	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,076.94 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor JMWays LLC d/b/a Skyline Chili		Case number (if known)	
Name			
2.15	Priority creditor's name and mailing address Kindra Bailey 352 Erni Ave. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$468.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.16	Priority creditor's name and mailing address Lisa Graham 814 University Woods Dr. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$131.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.17	Priority creditor's name and mailing address Mariah Smith 1722 Ekin Avenue New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$855.00 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.18	Priority creditor's name and mailing address Mike Marlow 403 Orchard Hill Dr. #8 Jeffersonville, IN 47130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,307.70 \$0.00
Date or dates debt was incurred		Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

2.19	Priority creditor's name and mailing address Nashiria Neal 1515 Byron Dr. Clarksville, IN 47129	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$340.00	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.20	Priority creditor's name and mailing address Taylor Barnett 30 Countryside Dr. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$242.00	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.21	Priority creditor's name and mailing address Thomas Cornett 1444 Vincennes St. New Albany, IN 47150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$930.00	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Notice Only - Will be Paid, for the Pay Period Prior to Filing, According to the Wage Motion		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address Mike Marlow 3310 E 10th St. Suite 351 Jeffersonville, IN 47130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133,114.00

Debtor **JMWays LLC d/b/a Skyline Chili**
Name

Case number (if known)

3.2 Nonpriority creditor's name and mailing address

Skyline Chili, Inc.
4180 Thunderbird Lane
Fairfield, OH 45014

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Franchise Agreement**Is the claim subject to offset? ☒ No ☐ Yes**Unknown**

3.3 Nonpriority creditor's name and mailing address

William Jacobs
3505 Grant Line Rd.
New Albany, IN 47150

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Loan**Is the claim subject to offset? ☒ No ☐ Yes**\$44,200.00****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the
related creditor (if any) listed?Last 4 digits of
account number, if
any**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts5a. \$ **13,190.64**5b. + \$ **177,314.00**5c. \$ **190,504.64**

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Area Franchise Agreement**

State the term remaining

List the contract number of any government contract _____

**Skyline Chili, Inc.
4180 Thunderbird Ln.
Fairfield, OH 45014**

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **Michael Marlow****3310 E 10th St. #351
Jeffersonville, IN 47130****First Savings Bank**☒ D 2.1☐ E/F _____☐ G _____2.2 **NA One LLC****3310 E 10th St. #351
Jeffersonville, IN 47130****First Savings Bank**☒ D 2.1☐ E/F _____☐ G _____2.3 **William Jacobs****3505 Grant Line Rd.
New Albany, IN 47150****First Savings Bank**☒ D 2.1☐ E/F _____☐ G _____

Fill in this information to identify the case:Debtor name JMWays LLC d/b/a Skyline ChiliUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2023** to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other _____**Gross revenue**

(before deductions and exclusions)

\$759,668.34**For prior year:**From **1/01/2022** to **12/31/2022**☒ Operating a business☐ Other _____**\$998,351.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**

(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**

Check all that apply

3.1. **See Attached****Unknown**☐ Secured debt☐ Unsecured loan repayments☐ Suppliers or vendors☐ Services☐ Other _____

Debtor **JMWAYS LLC d/b/a Skyline Chili**

Case number (if known) _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None
Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☐ None

Debtor **JM Ways LLC d/b/a Skyline Chili**

Case number (if known) _____

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.**Who was paid or who received the transfer?**
Address**If not money, describe any property transferred****Dates****Total amount or value****12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.**Who received transfer?**
Address**Description of property transferred or payments received or debts paid in exchange****Date transfer was made****Total amount or value****Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply**Address****Dates of occupancy**
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.☐ Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care****Part 9: Personally Identifiable Information**

Debtor **JMWays LLC d/b/a Skyline Chili**

Case number (if known) _____

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Store Space Self Storage 3525 Grant Line Rd. New Albany, IN 47150	Mike Marlow, William Jacobs	Catering supplies and paper products	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Debtor **JMWays LLC d/b/a Skyline Chili**

Case number (if known) _____

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. **Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. NA One LLC 3310 E. 10th St. #351 Jeffersonville, IN 47130	NEED INFORMATION	Dates business existed EIN: 82-4639725 From-To
25.2. Willow Mangement Ltd. 3310 E. 10th St. #251 Jeffersonville, IN 47130	NEED INFORMATION	EIN: 83-1248490 From-To

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Lyssa Phiher MKA Pal Beach, LLC 631 US Highway 1 STE 405 North Palm Beach, FL 33408	2022

Debtor **JM Ways LLC d/b/a Skyline Chili**

Case number (if known) _____

Name and address	Date of service From-To
26a.2. Rob Howard 222 Kentucky Dr. Newport, KY 41071	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
William Jacobs	3505 Grant Line Rd. New Albany, IN 47150	Managing Partner	50
Name	Address	Position and nature of any interest	% of interest, if any
Michael Marlow	3310 E 10th St. #351 Jeffersonville, IN 47130	Managing Partner	50

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Debtor JMWays LLC d/b/a Skyline Chili

Case number (if known) _____

Name and address of recipient

Amount of money or description and value of
property

Dates

Reason for
providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent
corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension
fund**Part 14: Signature and Declaration**

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 6, 2023/s/ William Jacobs

Signature of individual signing on behalf of the debtor

William Jacobs

Printed name

Position or relationship to debtor Managing PartnerAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes



Page: 1 of 10

ACCOUNT : CK - [REDACTED]

PERIODIC STATEMENT

Date: Jun 30, 2023

Period: Jun 01, 2023 to Jun 30, 2023
(30 Days)

Enclosures: 5

JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Any Statement Savings with a non-personal primary account holder will be moving to a Business Statement Savings account on August 14th. All Daviess Statement Savings accounts will be renamed Statement Savings on August 14th.

Small Business Checking

ACCOUNT : CK - [REDACTED]

JM Ways LLC

Enclosures: 5

Account Summary

Beginning Balance	
as of 06/01/23	12,803.06
Deposits & Other Credits	101,018.23
Charges & Fees	0.00
Checks & Other Debits	112,245.94
Average Balance	7,320.46
Ending Balance	
as of 06/30/23	1,575.35

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
06/01		Deposit		608.00
06/01		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		73.83
06/01		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		
		REF*TN*RT3MHS5VVI\		171.05
06/01		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHPS001		1,937.95
06/02		Deposit		1,487.31
06/02		ACH Credit May Actvty GRUBHUB		
		INC ID1261328194		15.10
06/02		ACH Credit May Actvty GRUBHUB		
		INC ID1261328194		130.83
06/02		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		134.75
06/02		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHPS001		2,055.21
06/05		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		9.33
06/05		ACH Credit 230605P2 Square		


 Page: 2 of 10
 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		Inc ID9424300002		278.03
06/05		ACH Credit 230605P2 Square		
		Inc ID9424300002		296.80
06/05		ACH Credit GIFT CARD 5/3		
		BANKCARD SYS ID1310281170 5/3		
		BANKCARD GC FRANCH		
		STL4445024869315 SKYLINE		
		CHILI SOUTHE		467.51
06/05		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,534.46
06/05		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,381.45
06/05		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,407.65
06/06		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		96.24
06/06		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		277.44
06/06		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,352.68
06/07		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		95.29
06/07		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,644.70
06/08		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		107.41
06/08		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,206.49
06/08		ACH Credit Receivable Sky		
		Co-op ID1204895317		
		016AHATYT20BZMO Sky Co-op		
		Bill.com Acct #New Albany		
		Ind. - I		3,006.58
06/09		Deposit		15,000.00
06/09		ACH Credit Jun Actvty GRUBHUB		
		INC ID1261328194		78.90



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
06/09		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		133.25
06/09		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,820.23
06/12		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		134.02
06/12		ACH Credit 230612P2 Square Inc ID9424300002		186.59
06/12		ACH Credit 230612P2 Square Inc ID9424300002		243.47
06/12		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		1,690.72
06/12		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,006.55
06/12		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,723.21
06/13		ACH Credit EDI PAYMNT UBER USA 6787 ID3320456349		104.65
06/13		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		304.49
06/13		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,471.76
06/14		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		160.75
06/14		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		1,674.61
06/15		Deposit		1,193.00
06/15		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		131.38
06/15		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,001.88
06/16		ACH Credit Jun Actvty GRUBHUB INC ID1261328194		93.27
06/16		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		210.35
06/16		ACH Credit TXNS/FEEES HRTLAND		



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		PMT SYS IDWFBHEPS001		2,108.71
06/16		Deposit		1,159.46
06/20		ACH Credit 230619P2 Square Inc ID9424300002		132.11
06/20		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		167.28
06/20		ACH Credit 230620P2 Square Inc ID9424300002		220.94
06/20		ACH Credit 230619P2 Square Inc ID9424300002		259.36
06/20		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		333.80
06/20		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,243.89
06/20		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,312.83
06/20		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,326.53
06/20		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		3,062.71
06/21		ACH Credit EDI PAYMNT UBER USA 6787 ID3320456349 REF*TN*HI69Y2AE40\		101.60
06/21		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		160.12
06/22		Deposit		2,200.00
06/22		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		68.52
06/22		ACH Credit 230622P2 Square Inc ID9424300002		688.45
06/23		Deposit		350.00
06/23		ACH Credit Jun Actvty GRUBHUB INC ID1261328194		91.29
06/23		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		140.07
06/26		ACH Credit 230626P2 Square		


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 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		Inc ID9424300002		141.40
06/26		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		156.97
06/26		ACH Credit 230626P2 Square		
		Inc ID9424300002		158.27
06/26		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,916.81
06/26		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,217.76
06/26		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		9,218.34
06/27		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		242.38
06/27		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		285.14
06/27		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,020.75
06/28		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		51.66
06/28		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,760.72
06/29		Deposit		1,380.00
06/29		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		75.36
06/29		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,564.84
06/30		Deposit		1,318.16
06/30		ATM Deposit 3538 E 10TH STREET JEFFERSONVILL IN #3476 #FNCFF3A1		600.00
06/30		ACH Credit Jun Actvty GRUBHUB INC ID1261328194		137.75
06/30		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		193.63
06/30		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,311.45


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 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
06/01		ATM POS Debit CINTAS CORP 972-9967900 OH #0896 #MRH	42.80	
06/01		ACH Debit ACH Debit INDIANA LOGO SIG ID9200502236 Internet Initiated Transaction-	167.00	
06/01		ACH Debit INS. EQUITABLE ID1135570651	594.04	
06/01		ACH Debit TXNS/FEES HRTLAND PMT SYS IDWFBHPS001	730.66	
06/02		ATM POS Debit MIDWEST SECURITY 888-408-0188 OH #0896 #MRH	52.31	
06/02		Tfr to XXXXXX0796 payroll Willow Management Gr	13,000.00	
06/02		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	2,956.35	
06/06		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	2,904.48	
06/07		ATM POS Debit TRENDSCO SUPPLY INC BATAVIA OH #0896 #MRH	335.31	
06/07		ACH Debit PREM PMT GRANGE INSURANCE ID1314192970	927.64	
06/08		ATM POS Debit CINTAS CORP 972-9967900 OH #0896 #MRH	42.80	
06/08		ATM POS Debit WAL-MART #2691 2910 GRANT LINE ROAD NEW ALBANY IN #0896 #24269101	112.79	
06/08		ATM POS Debit JEFFERSONVILLE PARKS DEPT 812-2856440 IN #0896 #MRH	214.80	
06/09		ATM POS Debit WM SUPERCENTER # Wal-Mart Super Center NEW ALBANY IN #0896 #26910004	36.89	
06/09		ATM POS Debit COCA COLA CONSOLIDATED I 800-777-2262		



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ACCOUNT : CK - [REDACTED]

JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		NC #0896 #MRH	346.56	
06/09		ACH Debit MPS BILLNG FIFTH		
		THIRD ACH ID1310281170	15.74	
06/09		ACH Debit ADP FEES ADP		
		PAYROLL FEES ID9659605001	104.43	
06/09		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,139.36	
06/10		Payment - Automatic Loan Pymt		
		W/D	14,671.81	
06/12		ATM POS Debit O REILLY AUTO		
		PA O REILLY AUTO PARTS 630		
		NEW ALBANY IN #2089 #52995701	21.38	
06/12		ATM POS Debit TRENDSCO SUPPLY		
		INC BATAVIA OH #0896 #MRH	302.00	
06/13		ATM POS Debit KROGER FUEL		
		#874 2864 CHARLESTOWN RD NEW		
		ALBANY IN #3476 #50874423	52.75	
06/13		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,941.01	
06/14		ATM POS Debit APR*APPRIVER		
		850-932-5338 FL #3476 #MRH	70.98	
06/15		Tfr to XXXXXX0796 payroll		
		Willow Management Gr	14,300.00	
06/15		ACH Debit ACH PMT AMEX		
		EPAYMENT ID0005000008	1,000.00	
06/16		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,913.02	
06/20		ATM POS Debit WM SUPERCENTER		
		# Wal-Mart Super Center NEW		
		ALBANY IN #3476 #26910004	12.25	
06/20		ATM POS Debit WM SUPERCENTER		
		# Wal-Mart Super Center NEW		
		ALBANY IN #3476 #26910004	52.29	
06/20		ATM POS Debit KROGER FUEL		
		#874 2864 CHARLESTOWN RD NEW		
		ALBANY IN #3476 #50874416	60.01	



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
06/21		ATM POS Debit KROGER FUEL #877 1027 JEFFERSONVILLE JEFFERSONVILL IN #3476 #50877632	50.12	
06/21		ACH Debit 8002255627 NCR HSR DIV ID2141901461	57.18	
06/21		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,154.74	
06/22		ACH Debit INDORITS DOR ITS PAYMENTS ID9207000TAX	5,516.75	
06/23		ACH Debit ADP FEES ADP PAYROLL FEES ID9659605001	134.80	
06/23		ACH Debit WEB PAY DUKEENERGYCORPOR ID4700130001	1,750.00	
06/23		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	2,989.47	
06/26		ATM POS Debit XERO US INV-4628368 HTTPSWWW.XERO CO #3476 #MRH	46.33	
06/27		ATM POS Debit GFS STORE #1515 1060 Veterans Parkway Clarksville IN #3476 #15000300	121.50	
06/27		Billpay Rob Howard	400.00	
06/27		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,315.38	
06/28		ACH Debit INS PYMT HUMANA INC. ID9040604802	2,880.00	
06/29		ATM POS Debit USPS PO 17598407 145 E ELM ST NEW ALBANY IN #3476 #84075096	9.65	
06/30		ATM POS Debit COCA COLA CONSOLIDATED I 800-777-2262 NC #3476 #MRH	154.72	
06/30		ATM POS Debit 170 NEWS AND TRIBUNE 812-2836636 IN #3476		


 Page: 9 of 10
 ACCOUNT : CK - [REDACTED]

 JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		#MRH	230.00	
06/30		Tfr to XXXXXX0796 payroll		
		Willow Management Gr	14,700.00	
06/30		ACH Debit ACH Debit INDIANA		
		LOGO SIG ID9200502236		
		Internet Initiated		
		Transaction-	167.00	
06/30		ACH Debit INS. EQUITABLE		
		ID1135570651	594.04	
06/30		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	2,929.69	

Checks Cleared

Date	Number	Amount	Date	Number	Amount
06/09	2079	701.11	06/05	2094	2,000.00
06/21	2088 *	22.00	06/22	2095	2,000.00
06/05	2093 *	4,200.00			

* = Indicates an Electronic Check.

* = Indicates a break in the Check number order.

Daily Balance Information

Date	Balance	Date	Balance	Date	Balance
06/01	14,059.39	06/12	13,975.83	06/23	1,372.27
06/02	1,873.93	06/13	12,862.97	06/26	15,135.49
06/05	3,049.16	06/14	14,627.35	06/27	13,846.88
06/06	2,871.04	06/15	2,653.61	06/28	12,779.26
06/07	3,348.08	06/16	1,152.92	06/29	15,789.81
06/08	8,298.17	06/20	13,247.28	06/30	1,575.35
06/09	21,986.46	06/21	10,224.96		
06/10	7,314.65	06/22	5,665.18		



Account: [REDACTED]
Page: 10

JM WAYS LLC
3010 E 10TH ST #201
JEFFERSONVILLE, IN 47130

DATE 4/7/23 JUN 07 PAYD 2079

PAY TO THE ORDER OF State Life \$ 701.11
Seven Hundred One 00/100 DOLLARS

FIRST SAVINGS
BANK
www.firstsavings.net

FOR 16917 Michael S. Marlow

#002079# 12830717881

06/09/2023 2079 \$701.11

JM WAYS LLC
3010 E 10TH ST #201
JEFFERSONVILLE, IN 47130

DATE 5/19/23 2088

PAY TO THE ORDER OF Heather Hordle \$ 22.00
Twenty Two 00/100 DOLLARS

FIRST SAVINGS
BANK
www.firstsavings.net

FOR Repa Michael S. Marlow

#002088# 12830717881

06/21/2023 2088 \$22.00

JM WAYS LLC
3010 E 10TH ST #201
JEFFERSONVILLE, IN 47130

DATE 5/1/23 2093

PAY TO THE ORDER OF ARC Healthshare LLC \$ 4200.00
Four Thousand 00/100 DOLLARS

FIRST SAVINGS
BANK
www.firstsavings.net

FOR James Vance Michael S. Marlow

#002093# 12830717881

06/05/2023 2093 \$4,200.00

JM WAYS LLC
3010 E 10TH ST #201
JEFFERSONVILLE, IN 47130

DATE 5/1/23 2094

PAY TO THE ORDER OF ARC Healthshare LLC \$ 2000.00
Two Thousand 00/100 DOLLARS

FIRST SAVINGS
BANK
www.firstsavings.net

FOR Michael S. Marlow

#002094# 12830717881

06/05/2023 2094 \$2,000.00

JM WAYS LLC
3010 E 10TH ST #201
JEFFERSONVILLE, IN 47130

DATE 5/12/23 2095

PAY TO THE ORDER OF ARC Healthshare LLC \$ 2000.00
Two Thousand 00/100 DOLLARS

FIRST SAVINGS
BANK
www.firstsavings.net

FOR Property Fox Michael S. Marlow

#002095# 12830717881

06/22/2023 2095 \$2,000.00



Page: 1 of 9

ACCOUNT : CK - [REDACTED]

PERIODIC STATEMENT

Date: Jul 31, 2023

Period: Jul 01, 2023 to Jul 31, 2023
(31 Days)

Enclosures: 6

JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Personal Money Market accounts will now have a minimum balance of
\$1,000.00.

Business Money Market accounts will now have a minimum balance
fee of \$8.00

Small Business Checking

ACCOUNT : CK - [REDACTED]

JM Ways LLC

Enclosures: 6

Account Summary

Beginning Balance	
as of 07/01/23	1,575.35
Deposits & Other Credits	86,082.41
Charges & Fees	0.00
Checks & Other Debits	79,135.67
Average Balance	7,208.28
Ending Balance	
as of 07/31/23	8,522.09

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
07/03		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		119.77
07/03		ACH Credit 230703P2 Square		
		Inc ID9424300002		140.78
07/03		ACH Credit GIFT CARD 5/3		
		BANKCARD SYS ID1310281170 5/3		
		BANKCARD GC FRANCH		
		STL4445024869315 SKYLINE		
		CHILI SOUTHE		311.37
07/03		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		1,977.76
07/03		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		2,274.82
07/03		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		2,688.60
07/05		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		134.48
07/05		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		
		REF*TN*FH3GW17VGL\		170.88


 Page: 2 of 9
 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
07/05		ACH Credit 230704P2 Square Inc ID9424300002		365.15
07/05		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		413.29
07/05		ACH Credit 230705P2 Square Inc ID9424300002		507.56
07/05		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		1,784.22
07/05		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,305.00
07/06		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		103.45
07/06		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		930.17
07/07		ACH Credit Jul Actvty GRUBHUB INC ID1261328194		16.18
07/07		ACH Credit Jun Actvty GRUBHUB INC ID1261328194		49.07
07/07		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		169.37
07/07		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,382.22
07/10		Deposit		4,000.00
07/10		ACH Credit 3505 Grant DoorDash Inc. ID4270465600		30.06
07/10		ACH Credit 230710P2 Square Inc ID9424300002		99.47
07/10		ACH Credit 230710P2 Square Inc ID9424300002		228.80
07/10		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		1,917.41
07/10		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,287.96
07/10		ACH Credit TXNS/FEEES HRTLAND PMT SYS IDWFBHEPS001		2,401.19
07/11		ACH Credit EDI PAYMNT UBER		



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		USA 6787 ID3320456349		121.51
07/11		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		201.50
07/11		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,168.23
07/12		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		133.85
07/12		ACH Credit PAYMENT EZCATER		
		ID463389051		309.95
07/12		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		1,511.76
07/13		Deposit		2,483.00
07/13		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		73.12
07/13		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,044.44
07/14		Deposit		1,364.29
07/14		ACH Credit Jul Actvty GRUBHUB		
		INC ID1261328194		92.74
07/14		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		185.50
07/14		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,177.99
07/17		ACH Credit 230717P2 Square		
		Inc ID9424300002		15.28
07/17		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		102.31
07/17		ACH Credit 230717P2 Square		
		Inc ID9424300002		131.35
07/17		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,365.32
07/17		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,460.16
07/17		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEHPS001		2,803.53
07/18		ACH Credit 3505 Grant		


 Page: 4 of 9
 ACCOUNT : CK [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
07/18		DoorDash Inc. ID4270465600		256.28
		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		
		REF*TN*PIAQIRX2F5\		403.53
07/18		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		2,215.15
07/19		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		153.46
07/19		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		1,991.21
07/20		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		115.13
07/20		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		1,984.71
07/21		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		76.05
07/21		ACH Credit Jul Actvty GRUBHUB		
		INC ID1261328194		149.36
07/21		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		2,705.08
07/24		ACH Credit 230724P2 Square		
		Inc ID9424300002		97.56
07/24		ACH Credit 230724P2 Square		
		Inc ID9424300002		103.51
07/24		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		163.66
07/24		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		1,497.13
07/24		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		2,115.43
07/24		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHPS001		2,410.87
07/25		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		
		REF*TN*C6T88U49QN\		249.32
07/25		ACH Credit 3505 Grant		


 Page: 5 of 9
 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		DoorDash Inc. ID4270465600		381.63
07/25		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		1,836.16
07/26		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		105.82
07/26		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,090.54
07/27		Deposit		3,028.00
07/27		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		150.11
07/27		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,079.12
07/28		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		91.68
07/28		ACH Credit Jul Actvty GRUBHUB		
		INC ID1261328194		221.35
07/28		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,312.03
07/31		Deposit		1,026.23
07/31		ACH Credit 230731P2 Square		
		Inc ID9424300002		42.94
07/31		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		200.45
07/31		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		1,657.43
07/31		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,429.81
07/31		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBHEHPS001		3,186.81
07/03		ATM POS Debit CIRCLE K 02230		
		CIRCLE K 02230 NEW ALBANY IN		
		#3476 #000102	14.00	
07/03		ATM POS Debit WM SUPERCENTER		
		# Wal-Mart Super Center NEW		
		ALBANY IN #3476 #26910007	35.60	
07/03		ACH Debit TXNS/FEEES HRTLAND		



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
07/05		PMT SYS IDWFBHPS001	722.74	
07/05		ATM POS Debit KROGER #396 200 NEW ALBANY PL. NEW ALBANY IN #3476 #50039672	12.23	
07/05		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,388.05	
07/06		ATM POS Debit WAL-MART #2691 2910 GRANT LINE ROAD NEW ALBANY IN #3476 #24269101	51.76	
07/06		ATM POS Debit SP CONSOLIDATED PLAS HTTPSWWW.CONSO OH #3476 #MRH	56.71	
07/07		ATM POS Debit AMERICAN WATER WORKS COMP 856-346-8200 NJ #3476 #MRH	347.10	
07/07		ACH Debit ADP FEES ADP PAYROLL FEES ID9659605001	102.64	
07/07		ACH Debit PREM PMT GRANGE INSURANCE ID1314192970	927.64	
07/07		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,233.02	
07/11		ACH Debit MPS BILLING FIFTH THIRD ACH ID1310281170	59.07	
07/11		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,068.92	
07/12		ACH Debit SETTLEMENT Rewards Network ID2133698905	38.28	
07/14		ATM POS Debit APR*APPRIVER 850-932-5338 FL #3476 #MRH	70.98	
07/14		Tfr to XXXXXX0796 payroll Willow Management Gr	12,500.00	
07/14		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,139.62	
07/17		ACH Debit ACH PMT AMEX EPAYMENT ID0005000008	1,950.00	
07/18		ATM POS Debit WM SUPERCENTER		


 Page: 7 of 9
 ACCOUNT : CK [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		# Wal-Mart Super Center NEW		
07/18		ALBANY IN #3476 #26910028	30.80	
		ACH Debit AR PAYMENT RFS		
07/19		Cincinnati ID2391168897	3,295.05	
		ATM POS Debit CHARLESTOWN		
07/19		CHARLESTOWN CHARLESTOWN IN		
		#3476 #05295102	7.48	
		ATM POS Debit MIDWEST		
07/19		SECURITY 888-408-0188 OH		
		#3476 #MRH	52.31	
07/19		ATM POS Debit CIRCLE K 02271		
		CIRCLE K 02271 JEFFERSONVILL		
07/19		IN #3476 #000102	72.80	
		ATM POS Debit JEFFERSONVILLE		
07/19		PARKS DEPT 812-2856440 IN		
		#3476 #MRH	527.40	
		ACH Debit SETTLEMENT Rewards		
07/21		Network ID2133698905	39.05	
		ATM POS Debit WAL WAL-MART		
07/21		SUP 2691 WAL-SAMS NEW ALBANY		
		IN #3476 #26910004	13.94	
		ACH Debit ADP FEES ADP		
07/21		PAYROLL FEES ID9659605001	118.75	
		ACH Debit AR PAYMENT RFS		
07/21		Cincinnati ID2391168897	3,166.80	
07/24		ATM POS Debit XERO US		
		INV-4685612 HTTPSWWW.XERO CO		
07/24		#3476 #MRH	35.55	
		Billpay Rob Howard	400.00	
07/24		ACH Debit INDORITS DOR ITS		
		PAYMENTS ID9207000TAX	5,472.69	
07/25		ACH Debit 8002255627 NCR HSR		
		DIV ID2141901461	57.18	
07/25		ACH Debit WEB_PAY		
		DUKEENERGYCORPOR ID4700130001	1,970.00	
07/25		ACH Debit AR PAYMENT RFS		


 Page: 8 of 9
 ACCOUNT : CK - [REDACTED]

 JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		Cincinnati ID2391168897	3,097.21	
07/26		ACH Debit SETTLEMENT Rewards Network ID2133698905	55.57	
07/28		ATM POS Debit WM SUPERCENTER # Wal-Mart Super Center NEW ALBANY IN #3476 #26910004	30.45	
07/28		Tfr to XXXXXX0796 payroll Willow Management Gr	12,100.00	
07/28		ACH Debit AR PAYMENT RFS Cincinnati ID2391168897	3,037.73	
07/31		Bill Payment Debit MICROSOFT*STORE REDMOND WA #3476 #00001000	69.99	
07/31		ATM POS Debit Spectrum 855-707-7328 MO #3476 #MRH	530.72	
07/31		ACH Debit INS. EQUITABLE ID1135570651	594.04	

Checks Cleared

Date	Number	Amount	Date	Number	Amount
07/10	2099	1,141.80	07/19	2102	2,000.00
07/07	2100	4,200.00	07/18	2103	300.00
07/07	2101	2,000.00	07/14	2104	5,000.00

^ = Indicates an Electronic Check.

* = Indicates a break in the Check number order.

Daily Balance Information

Date	Balance	Date	Balance	Date	Balance
07/03	8,316.11	07/13	19,032.18	07/24	8,975.55
07/05	10,596.41	07/14	2,142.10	07/25	6,318.27
07/06	11,521.56	07/17	8,070.05	07/26	8,459.06
07/07	3,328.00	07/18	7,319.16	07/27	13,716.29
07/10	13,151.09	07/19	6,764.79	07/28	1,173.17
07/11	12,514.34	07/20	8,864.63	07/31	8,522.09
07/12	14,431.62	07/21	8,495.63		



Account: [REDACTED]
Page: 9

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 6/26/23 2099

PAY TO THE ORDER OF Elite Lab \$ 1141.80
One Thousand One Hundred Forty One and 80/100 DOLLARS

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002099# ⑆283071788⑆ [REDACTED]

07/10/2023 2099 \$1,141.80

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 7/1/23 2100

PAY TO THE ORDER OF ARC Northshore LLC \$ 4200.00
Four Thousand Two Hundred

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002100# ⑆283071788⑆ [REDACTED]

07/07/2023 2100 \$4,200.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 7/1/23 2101

PAY TO THE ORDER OF ARC Northshore LLC \$ 2000.00
Two Thousand

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002101# ⑆283071788⑆ [REDACTED]

07/07/2023 2101 \$2,000.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 7/12/23 2102

PAY TO THE ORDER OF ARC Northshore LLC \$ 2000.00
Two Thousand

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002102# ⑆283071788⑆ [REDACTED]

07/19/2023 2102 \$2,000.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 7/6/23 2103

PAY TO THE ORDER OF ARC Northshore LLC \$ 300.00
Three Hundred

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002103# ⑆283071788⑆ [REDACTED]

07/18/2023 2103 \$300.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 7/6/23 2104

PAY TO THE ORDER OF JLS Architecture \$ 5000.00
Five Thousand

FIRST SAVINGS BANK

FOR Michael S. Mackow

#002104# ⑆283071788⑆ [REDACTED]

07/14/2023 2104 \$5,000.00



Page: 1 of 6

ACCOUNT : CK - [REDACTED]

PERIODIC STATEMENT

Date: Aug 13, 2023

Period: Aug 01, 2023 to Aug 13, 2023
(13 Days)

Enclosures: 5

JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Personal Money Mkt accts will now have a min balance of \$1,000.00.
Business Money Mkt accts will now have a minimum balance fee of \$8.00.
Business Money Mkt debit activity of 6 trans are subject to \$10.00 per item. Savings will now compound monthly.

Small Business Checking

ACCOUNT : CK - [REDACTED]

JM Ways LLC

Enclosures: 5

Account Summary

Beginning Balance	
as of 08/01/23	8,522.09
Deposits & Other Credits	32,253.51
Charges & Fees	0.00
Checks & Other Debits	39,960.07
Average Balance	5,236.63
Ending Balance	
as of 08/13/23	815.53

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
08/01		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		242.44
08/01		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		487.92
08/01		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		2,508.14
08/02		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		115.17
08/02		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		2,092.49
08/03		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		115.22
08/03		ACH Credit GIFT CARD 5/3		
		BANKCARD SYS ID1310281170		387.15
08/03		ACH Credit TXNS/FEEES HRTLAND		
		PMT SYS IDWFBEPHS001		2,251.13
08/04		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILL IN #3476		
		#FNCFF3A1		180.00
08/04		ATM Deposit 3538 E 10TH		


 Page: 2 of 6
 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		STREET JEFFERSONVILL IN #3476		
		#FNCFF3A1		296.00
08/04		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		159.91
08/04		ACH Credit Jul Actvty GRUBHUB		
		INC ID1261328194		205.06
08/04		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,430.44
08/07		ACH Credit 230807P2 Square		
		Inc ID9424300002		34.96
08/07		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		141.66
08/07		ACH Credit 230807P2 Square		
		Inc ID9424300002		155.69
08/07		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,139.70
08/07		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,308.74
08/07		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,513.83
08/08		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		263.22
08/08		ACH Credit EDI PAYMNT UBER		
		USA 6787 ID3320456349		
		REF*TN*0MX6HZVZ7G\		346.78
08/08		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		1,899.77
08/09		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		130.90
08/09		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEHPS001		2,160.95
08/10		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILL IN #3476		
		#FNCFF3A1		620.00
08/10		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILL IN #3476		


 Page: 3 of 6
 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		#FNCFF3A1		1,450.00
08/10		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		206.59
08/10		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEPS001		1,901.59
08/11		Deposit		296.00
08/11		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILLE IN #3476		
		#U751F3A1		300.00
08/11		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILLE IN #3476		
		#U751F3A1		367.00
08/11		ATM Deposit 3538 E 10TH		
		STREET JEFFERSONVILLE IN #3476		
		#U751F3A1		399.00
08/11		ACH Credit Aug Actvty GRUBHUB		
		INC ID1261328194		74.81
08/11		ACH Credit 3505 Grant		
		DoorDash Inc. ID4270465600		90.91
08/11		ACH Credit EDI PAYMNT PEPSI		
		6508 ID1371460334		
		00001*000003554\		1,005.00
08/11		ACH Credit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEPS001		1,975.34
08/01		ATM POS Debit AMZN Mktg		
		US*TH9TA4001 Amzn.com/bill WA		
		#3476 #MRH	17.44	
08/01		ACH Debit ACH Debit INDIANA		
		LOGO SIG ID9200502236		
		Internet Initiated		
		Transaction-	167.00	
08/01		ACH Debit TXNS/FEES HRTLAND		
		PMT SYS IDWFBHEPS001	722.09	
08/01		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,170.21	
08/02		ATM POS Debit MIDWEST		



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

Date	Number	Transaction Description	Debit Amount	Credit Amount
		SECURITY 888-408-0188 OH		
		#3476 #MRH	52.31	
08/02		ATM POS Debit STORE SPACE		
		ALBANY GRANT 833-7867366 IN		
		#3476 #MRH	218.00	
08/02		ACH Debit SETTLEMENT Rewards		
		Network ID2133698905	92.48	
08/02		ACH Debit PYMT VECTREN ENERGY		
		ID1350793669	1,044.67	
08/02		ACH Debit INS PYMT HUMANA		
		INC. ID9040604802	1,500.00	
08/03		ATM POS Debit WM SUPERCENTER		
		# Wal-Mart Super Center NEW		
		ALBANY IN #3476 #26910003	18.31	
08/04		ATM POS Debit WAL-MART #2691		
		2910 GRANT LINE ROAD NEW		
		ALBANY IN #3476 #24269101	21.09	
08/04		ATM POS Debit AT&T STORE		
		PLEASANT HILL CA #3476 #MRH	203.82	
08/04		ACH Debit ADP FEES ADP		
		PAYROLL FEES ID9659605001	103.25	
08/04		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,105.82	
08/08		ACH Debit PREM PMT GRANGE		
		INSURANCE ID1314192970	927.64	
08/08		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,377.78	
08/09		ACH Debit MPS BILLING FIFTH		
		THIRD ACH ID1310281170	10.38	
08/09		ACH Debit SETTLEMENT Rewards		
		Network ID2133698905	71.97	
08/09		ACH Debit WEB PAY RUMPKE		
		ID9900463002 Internet		
		Initiated Transaction-	321.77	
08/11		ATM POS Debit COCA COLA		
		CONSOLIDATED I 800-777-2262		


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 ACCOUNT : CK - [REDACTED]

JM WAYS LLC
 3310 E 10TH ST # 351
 JEFFERSONVILLE, IN 47130-7285

Deposits and Withdrawals Transaction Information

<u>Date</u>	<u>Number</u>	<u>Transaction Description</u>	<u>Debit Amount</u>	<u>Credit Amount</u>
		NC #3476 #MRH	134.90	
08/11		Withdrawal	292.65	
08/11		Tfr to XXXXXX0796 pay roll		
		Willow Management Gr	11,000.00	
08/11		ACH Debit AR PAYMENT RFS		
		Cincinnati ID2391168897	3,178.09	

Checks Cleared

<u>Date</u>	<u>Number</u>	<u>Amount</u>	<u>Date</u>	<u>Number</u>	<u>Amount</u>
08/04	2108	4,200.00	08/08	2112	34.40
08/04	2109	2,000.00	08/07	2114 *	1,974.00
08/08	2111 *	2,000.00			

^ = Indicates an Electronic Check.

* = Indicates a break in the Check number order.

Daily Balance Information

<u>Date</u>	<u>Balance</u>	<u>Date</u>	<u>Balance</u>	<u>Date</u>	<u>Balance</u>
08/01	7,683.85	08/07	8,677.25	08/11	815.53
08/02	6,984.05	08/08	4,847.20	08/13	815.53
08/03	9,719.24	08/09	6,734.93		
08/04	3,356.67	08/10	10,913.11		



Account [REDACTED]
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CHECKING WITHDRAWAL

FIRST SAVINGS NAME

DATE 08/11/23

NAME J M WAYS

AMOUNT \$ 292.65

ACCOUNT # 283071788

Signature: *Michael D. Markov*

08/11/2023 \$292.65

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 8/1/23

PAY TO THE ORDER OF *ARC Northlake LLC*

Amount \$ 4200.00

FIRST SAVINGS BANK

FOR *Michael D. Markov*

ACCOUNT # 283071788

08/04/2023 2108 \$4,200.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 8/1/23

PAY TO THE ORDER OF *ARC Northlake LLC*

Amount \$ 2000.00

FIRST SAVINGS BANK

FOR *Michael D. Markov*

ACCOUNT # 283071788

08/04/2023 2109 \$2,000.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 8/1/23

PAY TO THE ORDER OF *Michaelson Parking*

Amount \$ 2000.00

FIRST SAVINGS BANK

FOR *Michael D. Markov*

ACCOUNT # 283071788

08/08/2023 2111 \$2,000.00

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 8/1/23

PAY TO THE ORDER OF *HME*

Amount \$ 34.40

FIRST SAVINGS BANK

FOR *Michael D. Markov*

ACCOUNT # 283071788

08/08/2023 2112 \$34.40

JM WAYS LLC
3310 E 10TH ST #301
JEFFERSONVILLE, IN 47130

DATE 8/4/23

PAY TO THE ORDER OF *Freshway Garage*

Amount \$ 1974.00

FIRST SAVINGS BANK

FOR *Michael D. Markov*

ACCOUNT # 283071788

08/07/2023 2114 \$1,974.00



301 Southern Indiana Avenue
Jeffersonville, IN 47130

Account Number
Statement Date
Statement Thru Date
Check/Items Enclosed
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08/31/2023
3
1

00003948 M12820DDA09012300365 01 000000000 0000000 006



JM WAYS LLC
3310 E 10TH ST # 351
JEFFERSONVILLE IN 47130-7285

Customer Service Information

Phone: 1-833-372-4968
Mailing Address: 301 Southern Indiana Avenue,
Jeffersonville, IN 47130
Visit Us Online: www.fsbbank.net
Email: info@fsbbank.net
Find Us On: [f](#) [t](#) [u](#) [in](#)

SMALL BUSINESS CHECKING

Account Number: [REDACTED]

Account Owner(s): JM WAYS LLC

Balance Summary

Beginning Balance as of 08/12/2023	\$815.53	Service Charges for Period	\$0.00
+ Deposits and Credits (47)	\$54,385.04	Average Balance for Period	\$6,802
- Withdrawals and Debits (46)	\$46,910.35	Minimum Balance for Period	\$0
Ending Balance as of 08/31/2023	\$8,290.22		

DEPOSITS AND OTHER CREDITS

Date	Description	Deposits
Aug 14	DOORDASH, INC./3505 GRANT JM WAYS LLC	67.87
Aug 14	SQUARE INC/230814P2 L21652536516 JM WAYS LLC	312.00
Aug 14	SQUARE INC/230814P2 L21652536517 JM WAYS LLC	506.09
Aug 14	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,181.79
Aug 14	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,576.76
Aug 14	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,813.71
Aug 15	DEPOSIT# 000001776249517	381.40
Aug 15	UBER USA 6787/EDI PAYMNT REF*TN*VK0WA7HL9A\ SKYLINE CHILI 3505 GRA	231.57
Aug 15	DOORDASH, INC./3505 GRANT JM WAYS LLC	280.54
Aug 15	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,288.88
Aug 16	DOORDASH, INC./3505 GRANT JM WAYS LLC	86.04
Aug 16	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,360.03
Aug 17	DOORDASH, INC./3505 GRANT JM WAYS LLC	133.94
Aug 17	SQUARE INC/230817P2 L21652871438 JM WAYS LLC	239.34
Aug 17	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,539.12
Aug 18	GRUBHUB INC/AUG ACTVITY JM WAYS LLC	63.06
Aug 18	DOORDASH, INC./3505 GRANT JM WAYS LLC	166.98
Aug 18	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,176.93
Aug 21	SQUARE INC/230821P2 L21653181535 JM WAYS LLC	11.48
Aug 21	DOORDASH, INC./3505 GRANT JM WAYS LLC	43.20
Aug 21	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,059.15
Aug 21	HRTLAND PMT SYS/TXNS/FEES SKYLINE CHILI OF SOUTH	2,177.49





Account Number [REDACTED]
 Statement Date 08/31/2023
 Statement Thru Date 08/31/2023
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DEPOSITS AND OTHER CREDITS (Continued)

Date	Description	Deposits
Aug 21	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	2,242.66
Aug 22	UBER USA 6787/EDI PAYMNT REF*TN*C02U282X3I\ SKYLINE CHILI 3505 GRA	53.31
Aug 22	DOORDASH, INC./3505 GRANT JM WAYS LLC	190.79
Aug 22	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	1,784.64
Aug 23	DOORDASH, INC./3505 GRANT JM WAYS LLC	92.29
Aug 23	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	1,726.93
Aug 24	DOORDASH, INC./3505 GRANT JM WAYS LLC	39.53
Aug 24	SQUARE INC/230824P2 L21653527372 JM WAYS LLC	427.48
Aug 24	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	1,886.69
Aug 25	DEPOSIT	300.00
Aug 25	DEPOSIT# 000001776249517	3,906.00
Aug 25	GRUBHUB INC/AUG ACTVTY JM WAYS LLC	133.27
Aug 25	DOORDASH, INC./3505 GRANT JM WAYS LLC	211.86
Aug 25	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	1,978.65
Aug 28	DOORDASH, INC./3505 GRANT JM WAYS LLC	129.57
Aug 28	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	2,348.54
Aug 28	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	2,418.27
Aug 28	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	2,814.56
Aug 29	DOORDASH, INC./3505 GRANT JM WAYS LLC	310.25
Aug 29	UBER USA 6787/EDI PAYMNT REF*TN*EBMIKBTP6Q\ SKYLINE CHILI 3505 GRA	339.32
Aug 29	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	3,199.92
Aug 30	DOORDASH, INC./3505 GRANT JM WAYS LLC	136.91
Aug 30	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	2,136.27
Aug 31	DOORDASH, INC./3505 GRANT JM WAYS LLC	133.35
Aug 31	HRTLAND PMT SYS/TXNS/FEEES SKYLINE CHILI OF SOUTH	1,746.61

DEBITS AND OTHER WITHDRAWALS

Date	Description	Withdrawals
Aug 14	WAL-MART SUPER CENTER NEW ALBANY IN	106.10
Aug 15	AMERICAN WATER E/BILLPAY AMERICAN WATER JM WAYS LLC	260.00
Aug 15	AMEX EPAYMENT/ACH PMT MIKE MARLOW	1,000.00
Aug 15	RFS CINCINNATI/AR PAYMENT SKYLINE OF SOUTHERN IN	3,210.16
Aug 16	REWARDS NETWORK/SETTLEMENT SKYLINE CHILI OF SOUTH	49.32
Aug 16	TELEPHONE TRANSFER WITHDRAWAL	3,250.00
Aug 18	ADP PAYROLL FEES/ADP FEES 639961316SKYLINE CHILI	141.90
Aug 18	DUKEENERGYCORPOR/WEB_PAY 1110798587	1,550.00
Aug 18	RFS CINCINNATI/AR PAYMENT SKYLINE OF SOUTHERN IN	3,125.14
Aug 22	RFS CINCINNATI/AR PAYMENT SKYLINE OF SOUTHERN IN	3,258.54
Aug 23	NCR HSR DIV/8002255627 JM WAYS LLC	57.18
Aug 23	REWARDS NETWORK/SETTLEMENT SKYLINE CHILI OF SOUTH	72.51
Aug 23	DOR ITS PAYMENTS/INDORITS SKYLINE CHILI OF SOUTH	5,493.43
Aug 24	BILL PAY VB3CMS97 ROB HOWARD	400.00
Aug 25	ADP PAYROLL FEES/ADP FEES 640430964SKYLINE CHILI	68.10
Aug 25	RFS CINCINNATI/AR PAYMENT SKYLINE OF SOUTHERN IN	3,219.19
Aug 25	INTERNET TRANSFER TO CHECKING-0796	10,800.00
Aug 29	RFS CINCINNATI/AR PAYMENT SKYLINE OF SOUTHERN IN	3,200.47
Aug 30	REWARDS NETWORK/SETTLEMENT SKYLINE CHILI OF SOUTH	62.60
Aug 30	EQUITABLE/INS. 118303376MM JM WAYS	594.04
Aug 30	INTERNET TRANSFER TO CHECKING-0796	3,000.00





Account Number [REDACTED]
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ATM/POS TRANSACTION SUMMARY

Date	Description	Deposits	Withdrawals
Aug 14	ACCT-TO-ACCT TRANSFER APR*APPRIVER 850-932-5338 FL *****3476 08/13 00:42		70.98
Aug 14	POS PURCHASE NON-PIN WAL WAL-MART SUPER 451765 2691 WAL-SAMS NEW ALBANY IN *****3476 08/14 11:00		16.34
Aug 14	POS PURCHASE NON-PIN GFS STORE #1515 1060 VETERANS PARKWAY CLARKSVILLE IN *****3476 08/14 11:39		40.11
Aug 16	POS PURCHASE NON-PIN IN *GASKET GUY OF LOUISVI IN *GASKET GUY OF LOUIS 800-262-3246 CA *****3476 08/15 19:54		69.55
Aug 21	POS PURCHASE NON-PIN WM SUPERCENTER #2691 WAL-MART SUPER CENTER NEW ALBANY IN *****3476 08/19 13:10		72.46
Aug 21	POS PURCHASE NON-PIN KROGER #396 200 NEW ALBANY PL. NEW ALBANY IN *****3476 08/20 15:07		8.92
Aug 22	POS PURCHASE NON-PIN WAL WAL-MART SUPER 142659 2691 WAL-SAMS NEW ALBANY IN *****3476 08/22 08:14		11.69
Aug 23	POS PURCHASE NON-PIN XERO US INV-4749334 HTTPSWWW.XERO CO *****3476 08/22 14:53		37.00
Aug 23	POS PURCHASE NON-PIN CASEYS #4273 3718 CLIFTY DR MADISON IN *****3476 08/23 13:41		20.02
Aug 25	POS PURCHASE NON-PIN CIRCLE K 02230 NEW ALBANY IN *****3476 08/23 03:57		20.00
Aug 25	POS PURCHASE NON-PIN MIDWEST SECURITY 888-408-0188 OH *****3476 08/24 00:53		255.00
Aug 28	POS PURCHASE NON-PIN USPS PO 1759840750 145 E ELM ST NEW ALBANY IN *****3476 08/28 09:22		30.40
Aug 29	POS PURCHASE NON-PIN WAL-MART #2691 2910 GRANT LINE ROAD NEW ALBANY IN *****3476 08/29 09:46		124.49
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:30		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:31		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:31		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:31		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:32		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:32		42.80
Aug 30	POS PURCHASE NON-PIN CINTAS CORP 972-9967900 OH *****3476 08/29 03:32		42.80
Aug 30	POS PURCHASE NON-PIN WM SUPERCENTER #2691 WAL-MART SUPER CENTER NEW ALBANY IN *****3476 08/30 09:21		25.02
Aug 30	ACCT-TO-ACCT TRANSFER SPECTRUM 855-707-7328 MO *****3476 08/30 12:22		249.40





Account Number [REDACTED]
 Statement Date 08/31/2023
 Statement Thru Date 08/31/2023
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CHECKS PAID

Date	Check No.	Amount	Date	Check No.	Amount	Date	Check No.	Amount
Aug 25	0	200.00	Aug 22	*2110	2,000.00	Aug 16	*2113	440.69

* Indicates a Skip in Check Number(s)

DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
Aug 14	9,040.22	Aug 21	13,343.89	Aug 28	7,843.21
Aug 15	7,752.45	Aug 22	10,102.40	Aug 29	8,367.74
Aug 16	6,388.96	Aug 23	6,241.48	Aug 30	6,410.26
Aug 17	9,301.36	Aug 24	8,195.18	Aug 31	8,290.22
Aug 18	6,891.29	Aug 25	162.67		



5

First Savings Bank

Checking Withdrawal
DEADWOL

Customer: 0447094112
Corporate/State/Fin: 18/3/2013 11:59:49 AM
Doc Date: 08/20/2013 Branch: K. 3413 Seq #: 5 Item Seq: 0000000000

Michael J. Maclean Amount: \$ 200.00

650 47-17880 [REDACTED]

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20250522 15150001 H2020 1510354 151124

JM WAYS LLC
 2000 WEST 1ST AVE
 APT 200 PHOENIX, ARIZONA 85001
 2173
 08/1/13
 \$ 196.69
 87
 100 DOLLARS
 FIRST SAVINGS
 425 07 2023
 PHOENIX, ARIZONA 85001



B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Southern District of Indiana

In re **JMWays LLC d/b/a Skyline Chili**

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>0.00</u>
Prior to the filing of this statement I have received	\$	<u>0.00</u>
Balance Due	\$	<u>0.00</u>

2. \$ **0.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
Filing of lien avoidance and redemption motions; communications with clients, trustee and creditors; review and advise as to reaffirmation agreements.
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Discharge litigations; 707 and 523 actions; exemption issues including, but not limited to, contested motions for the turnover by the trustee; contested lien avoidance motions; contested adversary proceedings for the purpose of stripping liens; contested motions to redeem; attendance at any reaffirmation hearings, if necessary; and representation in any foreclosure action, collection suit, or non-bankruptcy matter.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 6, 2023

Date

/s/ Weston E. Overturf**Weston E. Overturf**

Signature of Attorney

Kroger, Gardis & Regas, LLP**111 Monument Circle****Suite 900****Indianapolis, IN 46204****317-777-7443**

Name of law firm

**United States Bankruptcy Court
Southern District of Indiana**

In re **JMWays LLC d/b/a Skyline Chili**

Debtor(s)

Case No. _____

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
---	----------------	----------------------	------------------

-NONE-

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Managing Partner** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **October 6, 2023**Signature **/s/ William Jacobs**
William Jacobs

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

Verification of Creditor List (rev 12/01/18)

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF INDIANA

In re:) Case No. _____
JMWays LLC d/b/a Skyline Chili)
)
) ☐ Check if this form is submitted with an amended creditor
) list.

Debtor(s).)

VERIFICATION OF CREDITOR LIST

(I/We) declare under penalty of perjury that all entities included or to be included in Schedules D, E/F, G, and H are listed in the creditor list submitted with this verification. This includes all creditors, parties to leases and executory contracts, and codebtors.

(I/We) declare that the names and addresses of the listed entities are true and correct to the best of (my/our) knowledge.

(I/We) understand that (I/we) must file an amended creditor list and pay an amendment fee if there are entities listed on (my/our) schedules that are not included in the creditor list submitted with this verification.

Dated: **October 6, 2023** _____

/s/ William Jacobs _____

William Jacobs

Signature of Debtor

Signature of Joint Debtor

(Note: Certificate of Service not required.)

FIRST SAVINGS BANK
501 E. LEWIS & CLARK PARKWAY
CLARKSVILLE, IN 47129

INDIANA DEPARTMENT OF REVENUE
100 NORTH SENATE AVENUE
INDIANAPOLIS, IN 46204

INTERNAL REVENUE SERVICE
575 N. PENNSYLVANIA STREET
INDIANAPOLIS, IN 46204

MICHAEL MARLOW
3310 E 10TH ST. #351
JEFFERSONVILLE, IN 47130

MIKE MARLOW
3310 E 10TH ST. SUITE 351
JEFFERSONVILLE, IN 47130

NA ONE LLC
3310 E 10TH ST. #351
JEFFERSONVILLE, IN 47130

SKYLINE CHILI, INC.
4180 THUNDERBIRD LANE
FAIRFIELD, OH 45014

SKYLINE CHILI, INC.
4180 THUNDERBIRD LN.
FAIRFIELD, OH 45014

WILLIAM JACOBS
3505 GRANT LINE RD.
NEW ALBANY, IN 47150

WILLIAM JACOBS
3505 GRANT LINE RD.
NEW ALBANY, IN 47150

**United States Bankruptcy Court
Southern District of Indiana**

In re **JMWays LLC d/b/a Skyline Chili**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **JMWays LLC d/b/a Skyline Chili** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

October 6, 2023

Date

/s/ Weston E. Overturf

Weston E. Overturf

Signature of Attorney or Litigant

Counsel for **JMWays LLC d/b/a Skyline Chili**

Kroger, Gardis & Regas, LLP

111 Monument Circle

Suite 900

Indianapolis, IN 46204

317-777-7443